MINUTES

Prevention Financial Workgroup

January 25, 2022 10:30 am- 12:00 pm Teleconference/Zoom

In Attendance

Michelle Brink-Gluhosky, Marisa Draper, Linda Colholf-Glover, Kara Graveman, Jason Simmons, Gaven Schweitzer, Jason Lillich, Amy Warwick, Akber Sakib, Michelle Spies, Laura Schaeffer, Doug Dix, Tiffany Wolfgang, Dawn Gordon, Stacy Bruels

Not Present:

Welcome and Introductions

Tiffany Wolfgang welcomed the group.

Overview and History of Workgroup

- Tiffany Wolfgang provided an overview and history of the workgroup including a timeline.
 Past behavioral health rates reviewed include substance use disorder in 2019, mental
 health in 2020, and justice initiatives in 2021. Prevention rates are the next up for review
 on the five-year cycle. Past workgroup information is located on the Department of
 Human Services' website: https://dhs.sd.gov/workgroups.aspx
- South Dakota Codified Law 28-22 formalized the rate setting process and is designed to
 formalize a rate methodology review and create an equitable process among provider
 types and ensure provider participation in what should be included in the rates and what
 they should be. Any changes in the rate would go through the Legislative process for
 budgetary approval.
- When available, rate methodology reviews have relied upon provider cost reports and survey information from provider groups. For the prevention rates, the group does not have the history of the rate methodology for the existing rates.

List of Services and Contracts

- Prevention rates include the six Center for Substance Abuse Prevention (CSAP) strategies: information dissemination, education, community-based, environmental, problem identification and referral, and alternatives billed at 15-minute units. Prevention providers are also able to bill actual costs related to implementation of evidence-based practices, coalition work, and travel. A 5% administrative charge is also permitted on direct services.
- In total, there are 23 contracts supported through the Substance Abuse Prevention and Treatment Block Grant totaling to about \$1.7 million. Another 12 contracts focus on

middle school methamphetamine prevention totaling to approximately \$700,00 in general funds. Combined 2.4 million dollars support prevention services.

Initial Survey Results

- A survey was sent to all contracted prevention providers to obtain additional information about the existing rate structure and thoughts on how or if it needed improvement as well as recommended credentials of staff providing services, staff salaries, and other costs related to prevention service delivery.
- In reviewing results, about half of the surveys indicated some need for improvement with the current reimbursement structure and half of surveys indicating it was "good". In response to what could be improved, 35% indicated they would like to see consistent rates across similar strategies, 30% indicated they were fine with the current structure while 25% indicated they would like to see the rates streamlined.
- In reviewing recommendations for the level of credentialing, overall, the feedback from
 the survey and workgroup indicated that being a Certified Prevention Specialist was less
 important, and that the focus should be on SAPST (Substance Abuse Prevention Skills
 Training) plus being trained in the evidence-based practice (EBP) as the minimum
 credentialing. The workgroup discussed that many of the providers are also seeking
 individuals who have a four-year degree.
- The workgroup discussed that it would be more important for individuals providing
 problem identification and referral to be an Addiction Counselor Trainee due to the
 nature of the service and potential an individual may need treatment. It also helps with
 credibility in schools and clear distinction of scopes of work with those providing mental
 health services.
- The Workgroup discussed the varying rates may be challenging because often times the same staff are delivering all strategies, but the salaries remain the same regardless of what they are doing. It was discussed that when setting up a new model, are there enough dedicated staff in education and problem id and referral to model a higher rate, but if all employees are delivering all services, how would a higher rate be built. The workgroup discussed adjusting salaries based on staff credentials.
- In reviewing the non-direct categories that are reimbursed based on actual costs, the
 workgroup felt that it would be difficult to wrap these areas up into the 15-minute unit
 rate as the costs are variable depending upon curriculum and items needing to be
 purchased. Regarding mileage, Michelle Spies mentioned that Human Service Agency
 Staff indicated reimbursement for travel outside of an hour. Kara Graveman indicated
 that her agency builds travel into the wages of staff.
- The workgroup discussed reviewing current salary and credentials of prevention staff as a starting point, but also reviewing compensation to make sure agencies are able to retain staff.

Next Steps

- The next workgroup meets on March 30th from 1-3pm, Central
- DSS staff will compile additional data and conduct further analysis of the survey data to include salaries and credentials and other costs for delivering prevention services.
- DSS staff may reach out to providers if additional information is needed, but providers should also send in any additional information they may have.